



APPLICATION FOR CONTRACTOR LICENSE  
FIRE PROTECTION CHEMICAL

Public Protection Cabinet  
Department of Housing, Buildings and Construction  
Fire Protection Systems  
101 Sea Hero Road Suite 100  
Frankfort, Kentucky 40601  
Telephone: (502)-573-0385

( ) Initial Application

( ) Renewal Application

In compliance with KRS Chapter 198B, I hereby request that I be issued or have renewed a Fire Protection Chemical Contractors license by the Department of Housing, Buildings and Construction as required by law. I am currently engaged or intend to engage in the preparation of technical drawings, installation, repair, alteration, addition, maintenance or inspection of fire protection chemical systems.

I agree to notify the Commissioner within thirty (30) days of my change of employment of any individual named as a certificate holder for this license. I also agree that any information in this application may be verified.

APPLICATION MADE FOR: \_\_\_\_\_  
(NAME OF COMPANY)

BUSINESS ADDRESS: \_\_\_\_\_  
(Include both PO Box number and  
street address if applicable) \_\_\_\_\_,  
(City) \_\_\_\_\_ (County or Parish)  
STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNERS BIRTH DATE: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DATE FILED WITH SECRETARY OF STATE'S OFFICE: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

FEDERAL IDENTIFICATION NUMBER: \_\_\_\_\_

BUSINESS TELEPHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

APPLICATION MADE BY: \_\_\_\_\_  
(NAME OF INDIVIDUAL)

CERTIFICATE OF COMPETENCY HOLDER APPLICANT(S) IS/ARE:  
(Include certificate number if individual(s) \_\_\_\_\_  
have ever or now hold Kentucky \_\_\_\_\_  
Certificate of Competency) \_\_\_\_\_

I, \_\_\_\_\_, swear or affirm that to the best of my knowledge and  
(Applicant)

belief, the statements contained herein in this application are true and complete.

\_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant Signature)

State of \_\_\_\_\_  
County of (Parish of) \_\_\_\_\_  
Sworn before me this \_\_\_\_\_, day of \_\_\_\_\_, 20 \_\_\_\_\_

NOTARY PUBLIC (My Commission Expires)

Include nonrefundable fee of \$250.00 and "ACORD" Certificate of Liability Insurance

